PTO/SB/01 (12-97)

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MIS control number.					
DECLARATION FOI	R UTILITY OR	Attorney Docket Number	42478-0001		
MAR 0 7 2006 W DESIGI PATENT APPL (37 CFR 1	N	First Named Inventor	MOYES, John et al.		
L PATENT APPL	ICATION	COMPLE	E IF KNOWN		
(37 CFR 1	.63)	Application Number	Unknown		
☐ Declaration ☑ Submitted	Declaration Submitted after Initial	Filing Date	herewith		
with Initial Filing	Filing (surcharge (37 CFR 1.16(e))	Group Art Unit	not assigned		
i iiiig	required)	Examiner Name	not assigned		

As a below named Inventor, I hereby declare that:									
My residence, post office a	address, and citiz	zenship are as stated belo	w next to my na	me.					
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:									
RECOVERING METALS FROM SULFIDIC MATERIALS									
		(Title of the In	vention)						
the specification of which is attached hereto OR									
■ Was filed on (MM/DD/YYYY)      ■ 06/28/2005									
Application Number ar	nd was amended	on (MM/DD/YYYY)	(if applicable).						
I hereby state that I have amended by any amendment			of the above id	entified speci	fication, including	the claims, as			
I acknowledge the duty to di	isclose informatio	on which is material to pate	entability as defi	ned in 37 CFF	1.56.				
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or _365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s)	Foreign Filing Date Priority Certified Copy Attacher Country (MM/DD/YYYY) Not Claimed YES NO								
2002953566	AU	12/31/2003				⊠			
2003902311	AU	05/02/2003				oxtimes			
2003903167	AU	06/20/2003				$\boxtimes$			
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Numbe	r(s)	Filing Date (MM/DD	(YYYY)	numb supp	ional provisional a sers are listed on emental priority of SB/028 attached	a ata sheet			

(Page 1 of 2)

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## **DECLARATION** – Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available

between the filing date of the prior application and the national or PCT international filing date of this application.											
U.S. Parent Application or PCT Parent Number				umber		Parent Filing Date (MM/DD/YYYY)			Parent Patent Number (if applicable)		
PCT/AU2003/001700					12/19/20						
Additional U.S.	or PCT	international applic	cation number	s are listed or	a suppleme	ntal priority	data sheet	PTO/SB/	)28 atta	ached hereto	
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.  As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the											
Patent and Tradema			with: 🛛 Cu	stomer Numb				<b>—</b>	F	Place Customer	
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Additional regis	tered pra	ectitioner(s) named	d on suppleme	ntal Register	ed Practitione	r Information	on sheet Pi	ΓΟ/SB/02C	attach	ned hereto.	
Direct all correspo	ondence				25213	$\neg$	OR 🗆 o	Orrespond	lence :	address below	
		or Bar (	Code Label		23213		<u>". п</u>	Cirospone		DOG! COO DC!OW	
Name	James	s A. Fox, Ph.D.		<del></del>		<del>-</del>					
Address											
Address											
City					State		ZIP				
Country			Telephone				Fax				
I hereby declare the											
believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.											
Name of Sole or First Inventor:							entor				
Given Name (first and middle (if any) Family Name or Surname											
John Moyes											
Inventor's Signature   (May)			~	Date 8/17/05							
		l		N 0	.					-	
Residence: City	New Se		New Sout			Citizenship		AU			
Post Office Addre	ess	5 Pambula Place									
Post Office Addre											
	-			Nov: Co.	ub.						
City		Forrestville	State	New Sout Wales	th     ZIP	2	:087	Country	,	AU	
Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:											

Please Type a plus sign (+) inside this box

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## **DECLARATION**

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page \_1\_ of \_1\_

Name of Additional Joint Inventor, if any:		☐ A petition has been filed for this unsigned inventor									
Given Name (first and middle (if any)			Family Name or Surname								
Frank						· Hou	ıllis				
Inventor's Signature		South.				Date 8/17/05		17/05			
			New South								
Residence: City	Lakemba	State	Wal		Country	AU	Citizenship		AU		
Post Office Address	3 Ernest Street										
Post Office Address											
City	Lakemba	State	Ne Sou Wal	ith	ZIP	2195	Country		AU		
Name of Additional	Joint Inventor,	if any:		A petition has been filed for this unsigned inventor							
Given Name	(first and middle (if	any)		Family Name or Surname							
Inventor's Signature		,		1			Date				
City		State Country					Citizenship				
Post Office Address											
Post Office Address		<b></b>									
City		State	ZIP				Country				
Name of Additional Joint Inventor, if any:				A petition has been filed for this unsigned inventor							
Given Name (first and middle (if any)				Family Name or Surname							
Inventor's Signature	Date										
City		State			Country		Citizenship				
Post Office Address											
Post Office Address	ss										
City		State			ZIP		Country				

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